

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	SF		11-29-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		32	12/6
FORMALITY REVIEW	BZ	3C3-883	12-10-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	3/6/11
2	5/8/02
3	6/4/03
4	11/20/03
5	19/04
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Claim	Date
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If more than 150 claims or 10 actions  
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